

OOSH SLEEP & REST POLICY & PROCEDURES

013

1. Policy Information

Policy title	OOSH Sleep & Rest Policy & Procedures
Policy version	O13.2
Classification	OOSH
Review cycle	1 year
Last review date	1 July 2024
Implementation date	15 July 2024
Next review date	1 July 2025
Approval Authority	Approved Provider (Principal), DPP, OOSH Nominated Supervisor
Person/s responsible for policy	OOSH Nominated Supervisor

2. Overview

Toongabbie Christian College OOSH (OOSH) acknowledges that effective rest and, where necessary, sleep strategies can assist in ensuring a child feels safe, secure and comfortable in the Service environment.

The Service defines 'rest' as a period of inactivity, solitude, calmness or tranquility and is considered different to a child being in a state of sleep in regards to the school age care of children. Whilst the majority of children who access the Service may never need to sleep or rest during their time at the Service, it is important that educators accommodate the sleep and rest needs of all children regardless of their age if it is needed. Examples of when this may be necessary are when children are feeling unwell, if they are tired from an excursion or if they have additional needs and their rest requirements are greater than their peers.

Due to the age of the children attending OOSH, there are no bassinets on the premises.

This document is based on recommendations from the evidence-based practice detailed on the ACECQA website.

A copy of this document is made available to parents/carers in the Parent Corner and on the College website.

3. Policy

3.1 General Principles

- 3.1.1 In accordance with the Education and Care Services National Law and Regulations, the Service will ensure that the needs for sleep and rest of children in the Service are met, having regard to the ages, developmental stages and individual needs of the children.
- 3.1.2 The Service communicates with families about their child's individual needs and to become aware of the different values and parenting beliefs, cultural or otherwise, that are associated with rest.
 - 3.1.2.a If a family's beliefs and practices are in conflict with the evidence-based practice recommendations, then the Service will not endorse an alternative practice, unless the Service is provided with written advice from a medical practitioner.

- 3.1.3 The Service has a duty of care to ensure that all children are provided with a high level of safety when sleeping or resting while in care.
- 3.1.4 In meeting the Service's duty of care, it is a requirement that management and educators implement and adhere to this document.
- 3.1.5 Children's sleep and rest environments are free from cigarette, tobacco smoke, e-cigarettes and/or vaping.
- 3.1.6 The sleep and rest environment, equipment and materials will be monitored to ensure a safe environment that is hazard free.
- 3.1.7 Educators will monitor sleeping or resting children at regular intervals and supervise the sleep and rest environment. Areas of particular focus will include the child's sleeping position, breathing, colour of the child's lips and skin, body temperature, head position, clothing or jewellery and ensuring the airway, head and face remains uncovered by any blankets or pillows.

4. Procedures

4.1Annual Risk Assessment

- 4.1.1 The Nominated Supervisor will be responsible for ensuring that a sleep and rest risk assessment is conducted annually, or as soon as practicable after becoming aware of any circumstances that may impact the safety, health or wellbeing of children during sleep and rest.
- 4.1.2 The Risk Assessment will identify and assess risks in relation to sleep and rest and specify how the identified risks will be managed and minimised. The individual circumstances and needs of the child will be considered to determine any risk factors that may impact the adequate supervision of sleeping and resting children, eg children with specific health care needs may need a higher level of supervision. All legislative requirements under R84C(2) will be considered in the risk assessment.
- 4.1.3 This information will be recorded and stored in the OOSH Google Drive and a copy is made available in the Parent Corner.

4.2Excursions

- 4.2.1 For transportation during excursions, an educator will be appointed to be the last person off the bus to ensure that no child has fallen asleep and is left on the bus as per the College's OOSH Excursion Policy & Procedures. This will be confirmed by a second educator.
- 4.2.2 The Sleep Safe Check will be completed for any child who has fallen asleep during an excursion or transportation.
- 4.2.3 Children who have fallen asleep will be gently woken up by the educator and escorted off the bus.

4.3Induction of Staff

- 4.3.1 Orientation with the procedures in this document, along with the Risk Assessment, will form part of the OOSH Educators' induction.
- 4.3.2 Educators will be adequately trained to ensure up to date knowledge, informed by Red Nose Australia. Training may take the form of education on induction, internal discussions and training at staff meetings (including review of the risk assessment), or external training courses/seminars and will be repeated annually at minimum.

4.4Sleep for School Age Children

- 4.4.1 Safe sleeping practices are relevant to school-aged children and if they are sleeping, they should be monitored at regular intervals.
- 4.4.2 Light bedding is the preferred option.
 - 4.4.2.a All used bedding will be washed.
- 4.4.3 Educators will show awareness of children's comfort and avoid overcrowding when children are in need of sleep.
- 4.4.4 Parents/Carers will be informed via SMS if their child has fallen asleep and also when they wake up.

4.5Rest for School Age Children

- 4.5.1 Quiet, solitary play experiences are available for those school-aged children who request the need for a rest or time away from their peers.
- 4.5.2 Educators will show awareness of children's comfort and avoid overcrowding when children are in need of rest.
- 4.5.3 The Service will provide a range of both active and restful experiences throughout the program and support children's preferences for participation.

4.6Safe resting practices for a child who is unwell

- 4.6.1 Please refer to the College's OOSH Incident, Illness, Injury and Trauma Policy & Procedures for additional information.
- 4.6.2 Parents/Carers will be contacted immediately to make arrangements to collect the child as soon as possible.
- 4.6.3 Children will be encouraged to rest in a quiet, comfortable and safe place.
- 4.6.4 Children will be encouraged to lie down and make themselves comfortable when displaying signs of being unwell.
- 4.6.5 All children will rest with their face uncovered.
- 4.6.6 Children who are unwell (and is awaiting collection from a parent/carer) will be provided with the highest supervision priority and monitored closely especially if the child has a high temperature or has vomited.
- 4.6.7 If the child has received a minor trauma to their head (and is awaiting collection from a parent/carer), they will not be left unattended for any period of time and must remain in an upright position.

4.7 Monitoring and Supervision

4.7.1 In the instance of a child sleeping, an educator will be allocated to complete and record interval checks every 15 minutes. Please refer to *Appendix A*.

4.8Sleep and Rest Environment and Equipment

- 4.8.1 The sleep and rest environment needs to be a quiet area with appropriate furnishings.
- 4.8.2 The designated area for children to be inactive and calm is located in the 'Quiet Corner' of O1, away from the main group.
 - 4.8.2.a Other children using this space are encouraged to find alternative activities.
- 4.8.3 The area and equipment will be checked regularly as part of the Services' safety check and hazard identification practices. The *Safe Sleep Checklist and Setup Form* will be used prior to use for the purpose of sleep/rest. Please refer to *Appendix B*.
- 4.8.4 Hygiene standards will be maintained when children use the sleep and rest area and equipment such as pillowcases and blankets will be washed after each use.
- 4.8.5 There may be occasions where children with additional needs will need to sleep or rest in their wheelchairs or other equipment such as a modified stroller. It is important that children are not left alone whilst sleeping in these and that the restraints are sufficiently fastened.
- 4.8.6 The Service will ensure the room temperature, airflow, noise and lighting is conducive to sleep and rest, when necessary, and that the provision of such lighting is appropriate for sleep checks to be completed.
- 4.8.7 Children's clothing items should be checked prior to them sleeping to ensure it doesn't present any hazards to them whilst asleep.

5. References

- ACECQA website
- Red Nose Australia
- Prepared in consultation with Becklyn

6. Considerations

Education and Care Services National Regulations	National Quality Standard	Other service policies/documentation	Other
R82, R84A, R84B, R84C, R84D, R87, R103, R105, R106, R107, R110, R115, R168, R170, R171, R172	QA2.1.1, QA2.1.2, QA2.2, QA3.1.1, QA3.1.2, QA6.1.2, QA7.1.3	 OOSH Providing a Safe Environment for Children Policy & Procedures OOSH Administration of First Aid Policy & Procedures OOSH Enrolment Policy & Procedures OOSH Staff Induction Policy & Procedures OOSH Staff Induction Policy & Procedures OOSH Emergency Policy & Procedures OOSH Safe Sleep Check form OOSH Sleep and Rest Risk Assessment 	 Red Nose Australia ACECQA Sleep and rest legislative requirements Kidsafe Australia United Nations Convention on the Rights of a Child





04: APPENDIX A



SAFE SLEEP CHECK

Child Name					Date			
 Sleeping child must be checked every 15 minutes If the child sleeps beyond an hour, the parent/carer must be contacted 								
Time								
Rise and fall of chest								
Face not obstructed or covered								
Colour of lips is natural (not pale, purple or blue)								
Ensure child's head is in a normal sleep position								
Ensure jewellery, scarves, clothing etc are not tight around the child's neck								
What position is the child sleeping in								
Educator Name								
Educator Signature								
Prior to falling asleep, did the child appear unwell?								
Prior to falling asleep, did the child mention they we	to falling asleep, did the child mention they were unwell?							
If the child is/appeared to be unwell, did you take their temperature?								
If you answered "Yes" to any of the above, please complete an incident report								

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O4: APPENDIX B



SAFE SLEEP CHECKLIST AND SETUP

Quiet Corner

Item	Check	Tick	Initial
Ground	Ensure there are no hazards such as scissors. Remove hazard and dispose of, or return to the correct location.		
Lounge	Ensure there are no hazards such as scissors on the lounge. Remove hazard and dispose of, or return to the correct location.		
Cushions	Ensure there are no hazards under the couch cushions. Remove hazard and dispose of, or return to the correct location.		
Sheet	Cover the lounge with a clean sheet (located in office area)		
Window	Lock open the window (if weather permits)		
Blinds	Close the blind		
Blinds	Open all blinds in O1		
Lights	Turn off the lights in O1. If natural light is not adequate, only turn off light directly above the Quiet Corner		
Air Con	Ensure the air conditioner is on, and at a comfortable level (If O1 is too hot, check and set up the Bean Bag area)		
Safe Sleep Check	Ensure a copy of the "Safe Sleep Check" is available to fill in as soon as the child falls asleep		

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